

ATTACHMENT 1

UNITED STATES
DEPARTMENT OF LABOR
MINE SAFETY and HEALTH ADMINISTRATION
COAL MINE SAFETY and HEALTH

CERTIFICATION OF ELECTRICAL EXPERIENCE

This form may be used by the district to evaluate applicants experience for electrical work under part 75.153 and 77.103.

This information is for district use only and is not to be distributed to the Qualification and Certification Unit.

Before being considered for qualification to perform electrical work, in accordance with the requirements of Sections 75.153 and 77.103, Title 30 CFR, the applicant must have at least one year of experience in performing electrical work in one or more of the following categories:

Please Check (T) the category(ies) in which you have this experience--

- ☐ Underground in a coal mine
- ☐ In the surface work areas of an underground coal mine
- ☐ In a surface coal mine
- ☐ In a non-coal mine
- ☐ In the mine equipment manufacturing industry
- ☐ In any other industry using or manufacturing similar equipment

I hereby certify that I have performed electrical work as specified in the category(ies) marked above for at least ____ years ____ months and that my experience is as listed below.

(Applicant's Signature)

(Date)

Electrical Work Experience

<u>Employer's Name and Address</u>	<u>Job Title</u>	<u>From</u>	<u>Date</u> <u>To</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

NOTE: The applicant must have been employed for one year in a position where the major duties consisted of installation and/or maintenance of electric circuits and equipments. Examples are one year experience as an electrician, electrician's helper, mine repairman, mine repairman's helper, etc.

Whoever knowingly makes any false statement, representation, or certification in any application, record, report, plan or other document filed or required to be maintained pursuant to this Act shall, upon conviction, be punished by a fine of not more than \$10,000, or by imprisonment for not more than five years, or both.

Instructions for Completing the MSHA Form 5000-1

Item 1. Company Name and Address

If in Item 8 on the form, *Company Address* is checked the full name and address of the company is required. This will be the address used to mail the Electrical Qualification cards.

Item 2. Mine ID or Contractor ID

The MSHA assigned MID or CID number may be filled in. This number is assigned by MSHA. If in Item 8 *Mine Address* or *Contractor Address* is marked then this becomes a required field. MSHA is no longer using miscellaneous Mine IDs or Contractor IDs example: XX-77003 and XX-77004.

Item 3. Instructor's Name (Required)

Provide the last name and first name of the instructor who gave the electrical training.

Item 4. Instructor's Social Security Number (Required)

This is a required field. The instructor is only allowed to teach what they are approved to teach through MSHA.

Item 5. Name of the County and State Where Training Took Place (Required)

This is a required field. County and State is required to provide information to the appropriate district if the MIS or CID is not used.

Item 6. AR/ROE Number (Required if training provided by MSHA or MSHA is reinstating the qualification)

This field is for MSHA use only.

Item 7. Date Training Completed (Required)

This is a required field for the date that the training was completed.

Item 8. Social Security Number and Choice of Where to Mail Cards (Required)

This is a required field. The individual's social security number is required. The box as to where to mail qualification cards is also required. If the box labeled *Mine Address* or *Contractor Address* is checked then Item 2 becomes a required field. If box *Company Address* is checked then Item 1 is required. If the box *Miner Address* is checked then Item 10 becomes a required field.

Item 9. Name (Required)

This is a required field. Input the last, first, middle initial for the individual that has received the training.

Item 10. Address if Sent to the Miner

Fill in the miner's information if in Item 8 the box *Miner Address* is selected. The cards will be mailed to this address.

Item 11. Electrical Codes (Some or all codes required)

These check boxes should be used to indicate which training the individual received.

EB - Initial Underground Training EC - Retraining Underground

ED - Initial Surface Training EE - Retraining Surface

Item 12. MSHA use only [Codes]

Only MSHA personnel may use these codes. RU, RS codes are now used to reinstate Electrical Qualification.

RU - Reinstatement Underground

RS - Reinstatement Surface

Item 13. Signature of Instructor (Required)

The signature of the Instructor mentioned in Item 3 must appear here to "Certify that the above individuals have completed the Courses indicated."

SOP- for Processing Electrical Training Forms (5000-1) for MSIS System

Electrical Initial Course Review

Coal District Electrical Supervisor (DES) will review and initial Electrical Form 5000-1 as being reviewed and approved or note that part or all of the form is rejected.

- a) If the entire form is rejected:
 - i) District Electrical Supervisor will notify the Instructor in writing if the 5000-1 form will not be approved. The letter should contain the reason for the Denial Notification. Do not send the form to Q&C.
- b) If the DES rejects a miner on the form:
 - i) The DES will notify Q&C in writing what Miner(s) are being denied the qualification.
 - ii) District Electrical Supervisor will notify the Instructor and Miner with the reason for the denial.
- c) Q&C will not enter the denied Miner into the System when entering the 5000-1 information for other Miners.
- d) Q&C will process the data to produce cards, letters, or denial notifications.

Retraining Courses

- 1) Applicant submits retraining form 5000-1 to Q&C.
 - a) Q&C will enter the data from the 5000-1 form, process the data and mail cards, letters and denial notifications to the applicant.

Electrical Reinstatements

- a) In order to reinstate a Qualification, the District Electrical Supervisor must ascertain that the Miner had a valid Qualification at some time in the past. The DES logs onto MSIS and uses the “Miner History Report” to find information on the miner. A past Qualification will be indicated with an “expired” status. If no such record exists, a reinstatement is not possible. If a reinstatement is not possible the District Electrical Supervisor will provide notification to the applicant that the reinstatement has been denied. A reinstatement request will also be rejected if the Miner has not earned a qualification through annual retraining since the last reinstatement request.
- b) If the qualification is listed as “expired”, the DES will fill out a 5000-1 form indicating which Miner(s) are to be reinstated. The DES adds his own AR number and signs the form. He mails it to Q&C.
- c) Q&C will enter the data and process the request. The system will grant the Qualification for the year in which the reinstatement is submitted. This means the reinstatement will only be in effect to the end of the year in which it was requested. Reinstatements cannot be requested for previous years or subsequent years, only for the current year.
- d) Q&C will generate and mail a card and letter to the Miner(s).

Instructions for Completing MSHA Form 5000-41

Item 1. Company Name and Address

The full name and address of the Company should be completely filled in. This is not required if certification cards are to be mailed to the mine-id address of record or the contractor-id address of record.

Item 2. Mine ID or Contractor ID (Required)

The MSHA assigned MID or CID number must be filled in.

Item 3. Social Security Number (Required)

The individuals' social security number who is receiving the Certification or Qualification is to be input here.

Item 4. Choice for Where to Send Cards (Required)

Check the box as to where to send the cards. Check the box labeled *Mine Address* or *Contractor Address* if the cards are to be sent to the address associated with MID or CID on record with MSHA. Check the box *Company Address* if the cards are to be sent to the address located in Item 1. Check the box *Miner Address* if the cards are to be sent to the individual miner and fill in the address in Item 6.

Item 5. Name (Required)

Provide the Last, First, and Middle Initial of the individual receiving the Certification or Qualification.

Item 6. Address if cards are mailed to the Miner.

Fill in the Miner's information if in Item 4 the box *Miner Address* was checked. This is the address where the cards will be mailed.

Item 7. Certifications (Required if request is for Activity Certification)

Choose the box designated for the type of Certification requested.

Item 8. Hoisting (Required if request is for Hoisting)

Choose the box designated for Hoisting Qualification requested.

Item 9. Type of Hoist (Required if request is for Hoisting)

Choose the box designated for type of Hoist requested.

Item 10. Signature for Hoisting Qualification (Required if request is for Hoisting)

If a box in Item 8 is marked, the person requesting the individuals be given hoisting qualifications needs to sign.

Item 11. Date (Required)

The date the Qualification is requested.

Item 12. Signature for Activity Certification (Required if request is for Activity Certification)

If a box in Item 7 is marked, then the person requesting the individual be given Certification needs to sign.

Item 13. Date (Required)

The date the Certification is requested.

Return to:

MSHA Qualification & Certification
P.O. Box 25367
Denver, CO. 80225
Phone (303) 231-5472
Fax (303) 231-5474

Privacy Act Statement

30 CFR 75.100, 77.100, 75.155 and 77.105 authorize the collection of this information. This information will be used to determine if miners satisfy the requirements to obtain the certification/qualification sought and for MSHA to maintain a record of these qualifications. Submission of the items identified in the instructions as required is mandatory and failure to submit the required information may delay or prevent action on the application. Collection of social security numbers as part of this form is mandatory and is authorized by Sec. 7(a)(2)(B) of the Privacy Act.

SOP – for Processing Health Activity Certification or Hoisting Engineers Qualification Request (5000-41) for MSIS System

Health Activity Certification or Hoisting Engineers Qualification Report

1. All underground Activity Certifications and Hoisting will be reviewed by the Districts prior to being submitted to Q&C.

- a) District Health and Safety Specialist will review and initial the Activity Certification/Hoisting Form (5000-41) as being reviewed and approved before forwarding to Q&C for processing.
- b) If the entire form is rejected:
 - i) The District Health and Safety Specialist will notify the Company or applicants that the form will not be approved and the reason for the rejection.
 - ii) Q&C will not enter the rejected 5000-41 information into the System.
- c) If a individual miner is rejected on the form:
 - i) The District Health and Safety Specialist will notify Q&C in writing what miner(s) are being rejected.
 - ii) The District Health and Safety Specialist will notify the Company or applicants with the reason for the rejection

Q&C will not enter the rejected Miner into the system when entering the 5000-41 information for the other applicants.

Instructions for Completing the MSHA Form 5000-17

Item 1. Company Name and Address

If in Item 7, the *Company Address* is marked the company name and address must be completely filled in.

Item 2. Exam Given By and Date of Exam (Required)

Who administered the exam, an MSHA Representative or a State Representative, and the date the exam was administered.

Item 3. Mine ID or Contractor ID

The MSHA assigned MID or CID number may be filled in. This number is assigned by MSHA. If in Item 7, *Mine Address* or *Contractor Address* is marked then this becomes a required field. MSHA is no longer using miscellaneous Mine IDs or Contractor IDs example: XX-77003 and XX-77004.

Item 4. AR/ROE No. (MSHA only)

This field is for MSHA use only. Required field if MSHA representative administered the exam.

Item 5. Examiner's Name Last, First MI (Required)

Provide the name of the person giving the exam.

Item 6. State Where Exam Was Given (State Abbr.) (Required)

The abbreviated state code where the exam was given, i.e. CO for Colorado.

Item 7. Social Security Number and Choice for Where to Send Cards (Required)

This is a required field. The individuals' social security number who is taking the exam is to be input here. Also check the box as to where to send the cards. Check the box labeled *Mine Address* or *Contractor Address* if the cards are to be sent to the address associated with MID or CID on record with MSHA. Check the box *Company Address* if the cards are to be sent to the address located in Item 1. Check the box *Miner Address* if the cards are to be sent to the individual miner and fill in the address in Item 10.

Item 8. Name (Required)

The Last, First, MI of the individual taking the exam.

Item 9. Address if Sent to the Miner

Fill in the Miner's information if in Item 8 the box Miner Address was check. This is the address that the cards will be sent.

Item 10. Test Codes (Required)

Check the boxes for the test codes that were administered during this exam.

Item 11. Signature of the Examiner (Required)

The signature for the examiner mentioned in Item 5 certifying, "the above individuals have completed the courses indicated."

Item 12. Today's Date

The date the exam form was signed by the examiner. Use this form to report certification/qualification when the candidate meets the requirements by passing a written examination given by MSHA. Electrical exams may be given by MSHA or an approved State Examiner for the following eight states: Alabama, Colorado, Kentucky, Ohio, Tennessee, Utah, Virginia, and West Virginia.

Exam Codes

Electrical Underground	ZN		Certified Laboratory Technician	ZM (MSHA Only)
Electrical Surface	ZO		Methane/Oxygen Underground	XU
Dust Sampling	ZH		Methane/Oxygen Surface	XS
Dust Equipment/ Calibration	ZJ		Impoundment Inspection	ZE
Certified to Weigh & Process Dust Samples	ZK (MSHA Only)		Blasting Underground	ZX

Instructions for Completing the MSHA Form 5000-13

Instructor Codes

CH - Gas Detection
CI - Dust Certification (Underground)
CS - Dust Certification (Surface)
CZ - Impoundment Inspection
EB - Electrical Initial Training (Underground)
EC - Electrical Annual Retraining (Underground)
ED - Electrical Initial Training (Surface)
EE - Electrical Annual Retraining (Surface)
HT - Hoist-man Qualification
IS - Surface
IU - Underground
MR - Mine Rescue
MS - Mine Emergency Training

Instructor Limitations by Subject Codes

BC - Barricading
EH - Electrical Hazards
EP - Escape and Emergency Procedures
EX - Explosives
FA - First Aid
GC - Ground Control
HA - Health
HR - Hazard Recognition
HS - Health and Safety Aspects
MG - Mine Gases
PA - Prevention of Accidents
RD - Clean-up Rock Dusting
RV - Roof and Rib Control and Ventilation
SM - Statutory Rights of Miners
SR - Self-Rescue and Respiratory Devices
ST - Mandatory Health/Safety Standards
TC - Transportation Controls and Communication
WE - Introduction to the Work Environment

Item 1. Company Name and Address (Required)

Full name and address of the Company is required.

Item 2. District Code (Required)

List the District Code responsible for the approval.

Coal District Codes

C0100 - Coal District 1
C0200 - Coal District 2
C0300 - Coal District 3
C0400 - Coal District 4
C0500 - Coal District 5
C0600 - Coal District 6
C0700 - Coal District 7
C0800 - Coal District 8
C0900 - Coal District 9
C1000 - Coal District 10
C1100 - Coal District 11

Metal/Non Metal District Codes

M2000 - Northeastern District
M3000 - Southeastern District
M4000 - North Central District
M5000 - South Central District
M6000 - Rocky Mountain District
M7000 - Western District

Item 3. Date Approved by District (Required)

The approval date should match the date that is on the District Approval letter if District letter is supplied. This is a required field.

Item 4. District Manager Signature (must be signed) (Required)

Required Field, whenever a 5000-13 form is submitted it must be signed by the District Manager before the Qualification & Certification Unit will process it.

Item 5. Recommended by

The person's name who is recommending the individual to become an MSHA Certified Instructor.

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Item 6. Social Security Number (Required)

The Social Security Number for the individual obtaining Instructor Certifications.

Item 7. Name (Required)

The Last, First, MI name of the individual obtaining Instructor certifications.

Item 8. Use Instructor Name and Address for Contact (Required)

If the cards should be sent directly to the Instructor check box 'Yes' and supply the address in item 13. If the cards are to be mailed directly to the company, check No and the card will be sent to the address in Item 1.

Item 9. Monitor Status (Required if monitored)

When an instructor is monitored by MSHA personnel, the date that the instructor was monitored and the AR/ROE# for the MSHA person is required. The course codes monitored are also required.

Item 10. Select How Instructor Was Trained

Mark if the instructor was trained by a Designated Instructor or E&T Instructor.

Item 11. Type of Instructor (Required)

There are 4 different types of instructors, please choose the type of instructor for the individual applying.

Item 12. Instructor Approval Status (Required)

AI- Approved Instructor

PI- Instructor approved provisionally until MSHA can monitor performance.

Item 13. Instructor Address

If in Item 8 you choose to have the instructor be the contact person, fill in the address in item 13.

Item 14. Codes (Required)

Mark which codes this instructor will have permission to teach.

Item 15. Limitations by Section or Subject

An instructor may be limited to teaching only certain Sections or Subjects, please choose which sections or subjects in this item.

Limitations only apply under Part 48 Underground or Surface (IS, IU). An instructor may be approved to teach all of Part 48 or an instructor may be approved to teach only certain sections. An instructor who can only teach certain sections of Part 48 is considered a limited instructor and may be limited to sections such as 48.6 or 48.26. The limitation section is directly linked to the primary instructor code of IS or IU.

Limitations may also be applied by using the subject, please see above names and codes. If subject codes are used to limit an instructor, they must be linked to an IU or IS code.

An instructor may be limited by using Sections or Subjects but not both for the same code. It is acceptable, for example to limit by section for IS and limit by subjects for IU.

ATTACHMENT 8

Accessing MSHA MSIS System for Reports

Enter <http://mshanet.msha.gov> into your internet explorer.
Under "General Information" choose "MSIS/ Common Platform"

MSHA Intranet Home Page - Microsoft Internet Explorer provided by US Dept of Labor / MSHA

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Media Print W Address <http://mshanet.msha.gov/> Go Links »

Home Program Area Pages FAQs Reference Pages Other Web Sites Phone Other User Resources Search

U.S. Department of Labor
Mine Safety and Health Administration

MSHA Net

mshanet.msha.gov Search MSHANet Go Help The Intranet Site for the Employees of the Mine Safety and Health Administration

« Text Version of Page »

Program Area Home Pages

- Assistant Secretary
- A&M
- Assessments
- Coal
- EPD
- Metal/Nonmetal
- OSRV
- PEIR
- Technical Support

General Information

- Fatality Information
- Mine Emergency Ops.
- Newsclips
- Employee Safety & Health Office
- MSIS/Common Platform**
- Local Interest Pages
- Local Emergency Info.

MSHANet Resources

- MSHANet Information
- What's New
- Site Map

News Items and Hot Topics

Fri. October 03, 2003 2:16

- » [2003 Hispanic Heritage Presentation in Arlington - Photos and Remarks](#)
(Added 10/03/2003)
- » [AIB 03-26: Personnel Changes in Metal and Nonmetal](#)
(Added 10/03/2003)
- » [National Fire Prevention Week: October 5-11, 2003](#)
(Added 10/02/2003)
- » [AIB 03-24: FY 2004 Obligating Documents](#)
(Added 10/01/2003)
- » [AIB 03-25: Annual Filing Requirements for Confidential Financial Disclosure Reports](#)
(Added 09/30/2003)
- » [MNM Northeastern District September Newsletter](#)
(Added 09/30/2003)
- » [Hispanic Heritage Program \(Arl\)](#)
(Added 09/29/2003)
- » [Printable PeopleTime Timesheet \(PDF\)](#)
(Added 09/22/2003)

Employee Resources

- PeopleTime Login
- Common E-mail Web Page
- Benefits Corner
- Employee Express
- Thrift Savings Plan
- Vacancy Announcements
- Jobs at MSHA

MSHA Reference Info.

- MSHA Locator
- MSHA Directives
- PEIR/IT Help Desk
- FAQ Home Page
- Q&A/FAQ Home Page
- General Reference
- IPAL Issues
- Core Load Issues
- Statistical Reports
- Biquery/Teradata Reference

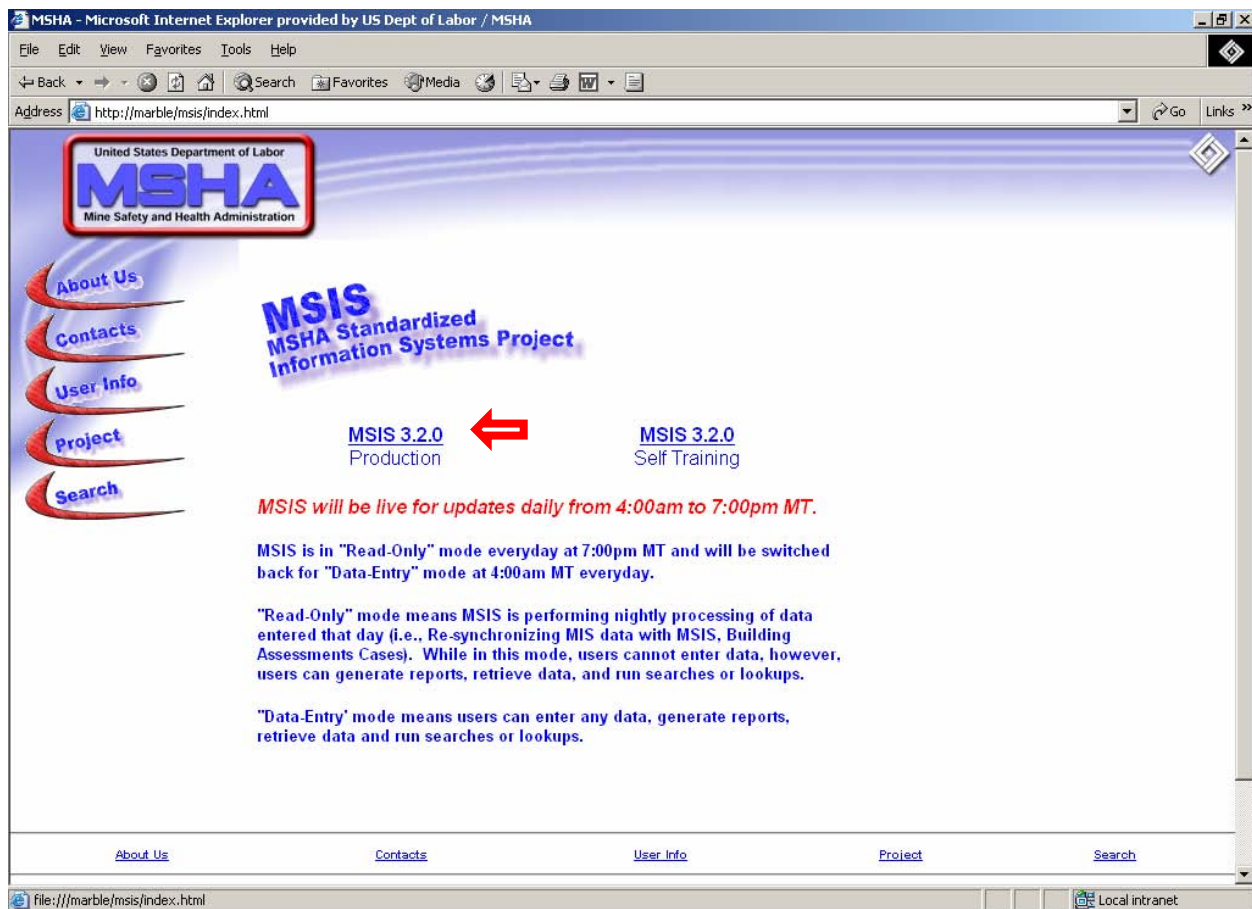
Useful Internet Resources

- Dictionary/Thesaurus

Done Trusted sites

The next screen is going to ask which MSIS site you want to go to. Choose the MSIS Production

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Finally enter your user name which is last name- first name and your MSIS password. The information you see will depend on your access levels.

If you do not have a MSIS password or you need further assistance please contact the MSIS Help desk at 1-877-778-6055.